Domestic Minor Sex Trafficking



Amy Goldberg, MDa,*, Jessica Moore, BAb

KEYWORDS

- Domestic minor sex trafficking (DMST)
- Commercial sexual exploitation of minors (CSEC) Sexual abuse
- Sexual exploitation
 Sexually transmitted infection (STI)

KEY POINTS

- Commercial sexual exploitation of children and child sex trafficking is a major public health issue and a manifestation of the child sexual abuse occurring globally. Recently, these crimes have become increasingly recognized within the United States, where it is known as domestic minor sex trafficking.
- Sexually exploited minors are commonly identified as having psychosocial risk factors, such as histories of abuse or neglect, running away, substance use or abuse, and involvement with child protective services. Youth also suffer a variety of physical and mental health consequences, including posttraumatic stress disorder, depression, anxiety, and suicidality.
- Child psychiatrists and other medical providers have the opportunity to identify, interact, and intervene on behalf of involved and at-risk youth.

DEFINITIONS

Commercial Sexual Exploitation of Children

Commercial sexual exploitation of children (CSEC), also referred to as child sex trafficking or commercial sexual exploitation of youth, is defined as the engagement of minors (<18 years of age) in sexual acts for money, food, shelter, or another valued entity. Sexual acts are broadly defined to include street-based and Internet-based sex, escorting, survival sex, stripping, pornography, or other acts in any venue. The federal Trafficking Victims Protection Act of 2000 states that the identification of minors as victims does not require evidence of threat, force, fraud, or coercion.

CSEC is a broad term that encompasses international, domestic, and transnational sex trafficking. Exploited adolescents can be trafficked across national borders, within a country, a state, or a single neighborhood.^{2,3} Using the terminology of CSEC as

Disclosure Statement: The authors have no commercial or financial conflicts of interest or funding sources.

E-mail address: agoldberg@lifespan.org

^a Department of Pediatrics, The Warren Alpert Medical School of Providence, RI 02906, USA;

^b Hasbro Children's Hospital, Providence, RI 02906, USA

^{*} Corresponding author. 593 Eddy Street, Providence, RI 02903.

opposed to prostitution reflects a notable shift in the nomenclature and perception of trafficked youth, in which destigmatizing language identifies involved minors as victims instead of criminals.^{2,3} Greater awareness of this issue will facilitate a continued appropriate shift away from the disparaging paradigm that portrayed youth as blameworthy criminals and prostitutes, into a conception of these minors as survivors of child sexual abuse.³

Domestic Minor Sex Trafficking

There has been increased recognition of a subset of CSEC that identifies a population of victims who are US citizens or lawful permanent residents under the age of 18 years trafficked within United States borders; this is known as domestic minor sex trafficking (DMST).^{3,4} The recognition of DMST as a subset of CSEC is important because research has found that risk factors, consequences of involvement, and trafficking experiences differ between domestic and international victims. Muftic and Finn⁵ found that, compared with international sex trafficking survivors, domestic sex trafficking survivors had poorer health outcomes (physical injuries, sexually transmitted infections [STIs], mental health issues), histories of child physical and/or sexual abuse, alcohol or drug addiction, and reported suicidal ideations.⁵ The information presented in this article focuses on issues related specifically to DMST.

Epidemiology

There are currently no reliable national statistics on the incidence and prevalence of DMST due to the exceptional challenges associated with victim identification. Dotaining accurate data is difficult due to the clandestine nature of these crimes, survivors denying involvement, lack of collaboration across multiple disciplines, and the application of different definitions and laws. The incidence of DMST is believed to be underreported, similar to cases of child sexual abuse. Particularly, there is a paucity of reporting by male victims and by gay, bisexual, transgender, and queer involved youth, due to a hesitancy of disclosures and because most outreach programs focus on female victims. As a contract of the programs focus on female victims.

It is conservatively estimated that 200,000 US minors are exploited annually with instances reported in all 50 states and the District of Columbia.⁸ Furthermore, it is most widely cited that approximately 244,000 to 325,000 children are at risk for sex trafficking each year.⁹ The average age a child is recruited is 12 to 14-years-old.⁴ A uniform approach to this problem across the country is necessary to fully understand the causes of these crimes, including consistent terminology use, a centralized database, and more frequent and broader screening, particularly in high-risk populations.^{2–4}

RISK

Risk factors for involvement in DMST include variables related to involved and at-risk individuals, their relationships with others, the community in which the individual resides, and society at large.⁷ The socioecological model is useful in considering the broad range of factors that place people at risk and illustrates how these factors interact within and across levels to increase risk or protection.¹⁰ This model has been adapted to demonstrate the complex forces that may contribute to initial and continued involvement in DMST (Fig. 1).⁷

Normative Adolescent Psychosocial Development

By virtue of their normal maturation and developmental stages, adolescents may be at risk of being recruited into DMST involvement.⁴ Normal adolescent development

Download English Version:

https://daneshyari.com/en/article/8809450

Download Persian Version:

https://daneshyari.com/article/8809450

<u>Daneshyari.com</u>